

below the mean for the child's chronological age.

3. Continuing Reduction in Linear Growth Velocity — A Basic Requirement

A fall in growth to, or persistence of growth below, the 3rd percentile **without a continuing reduction** in linear growth velocity does not meet the severity of Listing 100.02B because short stature, in and of itself, is not a medically determinable impairment. Even though the child will be short, he or she is now growing normally. Likewise, a child whose growth delay satisfies the criteria specified in Listings 100.02A or 100.03 but whose fall in growth is not also accompanied by a **continuing reduction** in growth velocity, does not meet the severity level of these listings. A continuing reduction in growth velocity is established in accordance with the procedure in [DI 24598.025B](#).

4. Measurements

Measurements of length or height must be obtained without shoes. Generally, **length** should be used for children under age 2; thereafter, **height** should be the basis of measurement of linear growth.

5. Duration

A minimum of 12 continuous months of reduced growth velocity must elapse or be expected to elapse in order to meet the duration requirement.

6. Resumption of Normal Growth Velocity

The child's growth pattern can be considered to have shown improvement and no longer be found to meet the listing when the growth rate has returned to a normal rate for age, i.e., serial measurements show age-appropriate incremental increases by application of the procedure in [DI 24598.025B](#).

Do not consider a short period (less than 6 months) of normal growth velocity amid periods of reduced growth velocity to be a resumption of growth.

7. Closure of the Major Epiphyses

Closure of the major epiphyses marks the cessation of further significant increases in height. Because a continuing reduction in growth velocity is required to demonstrate the presence of an ongoing causative disease process, the growth impairment listings cannot be applied once the major epiphyses have closed.

An individual who no longer demonstrates reduced growth velocity because of closure of the major epiphyses is considered to have medically improved.

Appropriate imaging techniques should be obtained to determine when epiphyseal closure has occurred.

B. PROCEDURE-DETERMINING THE PRESENCE OF IMPAIRED LINEAR GROWTH

1. Obtain measurements to confirm not only the **fall** in growth but also the **continuing reduction** in growth velocity. Compare current length or height with at least three measurements over a 12-month period, each measurement taken at least 2 months after the previous measurement. If the child is under age 2, compare current length with at least two measurements taken within a 6-month period, each measurement taken at least 2 months after the previous measurement.
2. Plot measurements on an acceptable growth chart (see [DI 24598.005](#)) or use the tables in [DI 24598.025](#) to determine if the requisite **fall in percentiles** is established.
3. Follow the procedure in [DI 24598.025B](#). to determine if **reduced linear growth velocity** continues.
4. If necessary (e.g., if underlying medical disorders have not been identified and the child's growth satisfies criteria in Listing 100.03 including the fall in growth velocity), determine:
 - whether the child's growth pattern is consistent with a constitutional growth delay (CGD). (See [DI 24598.001C.4](#))

NOTE: A finding that the child's height age is equal to bone age is consistent with CGD.

- whether the child's growth pattern is consistent with a familial characteristic. (See [DI 24598.001C.5.](#))

NOTE: Obtain the adult heights of the child's natural parents and the heights and ages of siblings to make this determination.

NOTE: Neither CGD nor FSS are medically determinable impairments, so if the child’s short stature is found to be due to either of these, find that the child does not have a linear growth impairment.

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